#### **OFFICIAL LOCAL FORM 3**

## UNITED STATES BANKRUPTCY COURT DISTRICT OF MASSACHUSETTS

#### **CHAPTER 13 PLAN COVER SHEET**

Filing Date:	6/30/17	Docket #:	17-12496
Debtor:	Timothy E. Adams	Co-Debtor:	
SS#:	xxx-xx-1483	SS#:	
	749 Berkley Street		
Address:	Berkley, MA 02779	Address:	
Debtor's Counsel:	Richard D. Smeloff 567869ATY		
	500 Granite Ave		
	Suites 7&8		
Address:	Milton, MA 02186		
Telephone #:	617-690-2124		
Facsimile #	617-690-2506		

ATTACHED TO THIS COVER SHEET IS THE CHAPTER 13 PLAN FILED BY THE DEBTOR(S) IN THIS CASE. THIS PLAN SETS OUT THE PROPOSED TREATMENT OF THE CLAIMS OF CREDITORS. THE CLAIMS ARE SET FORTH IN THE BANKRUPTCY SCHEDULES FILED BY DEBTOR(S) WITH THE BANKRUPTCY COURT.

YOU WILL RECEIVE A SEPARATE NOTICE FROM THE BANKRUPTCY COURT OF THE SCHEDULED CREDITORS' MEETING PURSUANT TO 11 U.S.C. § 341. THAT NOTICE WILL ALSO ESTABLISH THE BAR DATE FOR FILING PROOFS OF CLAIMS.

PURSUANT TO THE MASSACHUSETTS LOCAL BANKRUPTCY RULES, YOU HAVE UNTIL THIRTY (30) DAYS AFTER THE § 341 MEETING OR THIRTY (30) DAYS AFTER THE SERVICE OF AN AMENDED OR MODIFIED PLAN TO FILE AN OBJECTION TO CONFIRMATION OF THE CHAPTER 13 PLAN, WHICH OBJECTION MUST BE SERVED ON THE DEBTOR, DEBTOR'S COUNSEL AND THE CHAPTER 13 TRUSTEE.

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**OFFICIAL LOCAL FORM 3** 

## UNITED STATES BANKRUPTCY COURT DISTRICT OF MASSACHUSETTS

### PRE-CONFIRMATION CHAPTER 13 PLAN

**CHAPTER 13 PLAN** 

Docket No.: <b>17-12496</b>			
DEBTOR(S): (H) <b>Timoth</b>	y E. Adams	SS# xx	x-xx-1483
(W)		SS#	
I. PLAN PAYMENT AND TE	RM:		
Debtor's shall pay monthly to	the Trustee the sum of \$fo	r the term of:	
☐ 36 Months. 11 U.S.C. § 1	325(b)(4)(A)(i);		
☐ 60 Months. 11 U.S.C. § 1	325(b)(4)(A)(ii);		
<b>✓</b> 60 Months. 11 U.S.C. § 1	322(d)(2). Debtor avers the following of	cause:	
Due to Feasibility.			;0
II. SECURED CLAIMS  A. Claims to be paid through the	plan (including arrears):		
Creditor	Description of Claim (pre-petition purchase money, etc.)	arrears,	Amount of Claim
Seterus Inc.	Pre-petition arrears	\$	19,346.00
Total of secured claims B. Claims to be paid directly by of Creditor AmeriCredit/GM Financial Seterus Inc.	to be paid through the Plan \$ lebtor to creditors (Not through Plan):  Automobile Loan Mortgage	19,346.00  Description of Claim	
C. Modification of Secured Clain	ns:		
Creditor	Details of Modification (Additional Details May Be Attached)		Amt. of Claim to Be Paid Through Plan
-NONE-			

D. Leases:				
	The Debtor(s) intend(s) to reject the residential/per-	rsonal property lease claims	of	
-	; or			
	The Debtor(s) intend(s) to assume the residential/p-NONE-	ersonal property lease clair	ns of	
iii.	The arrears under the lease to be paid under the pla	nn are <u>0.00</u> .		
III. PRIORI	TY CLAIMS			
A. Domestic	Support Obligations:			
Creditor -NONE-	Description of Claim	\$		Amount of Claim
B. Other:				
Creditor -NONE-	Description of Claim	\$		Amount of Claim
Total of Prior	rity Claims to Be Paid Through the Plan \$ 0.00			
IV. ADMIN	ISTRATIVE CLAIMS			
A. Attorneys	fees (to be paid through the plan):			\$ <u>1,000.00</u>
B. Miscelland	eous fees:			
Creditor -NONE-	Description of Claim	\$		Amount of Claim
	ter 13 Trustee's fee is determined by Order of the utilizes a 10% Trustee's commission.	United States Attorney Gen	eral. The	e calculation of the Plan payment
V. UNSECU	RED CLAIMS			
The general u	nsecured creditors shall receive a dividend of0	_% of their claims.		
A. General	unsecured claims:			\$0.00
B. Undersecu	ared claims arising after lien avoidance/cramdown:			
Creditor -NONE-	Description of Claim		\$	Amount of Claim
C. Non-Disch	nargeable Unsecured Claims:			
Creditor -NONE-	Description of claim		\$	Amount of Claim
Total of Unse	ecured Claims (A + B + C):			0.00
D. Multiply t (Example:	otal by percentage: \$			

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Creditor	Descrip	otion of claim			Amount of claim
-NONE-				\$	
Total amount of separately class	sified claim	s payable at _	%	\$	0.00
I. OTHER PROVISIONS					
A. Liquidation of assets to be u	sed to fund	plan:			
B. Miscellaneous provisions:					
In order to receive a c	listribution	under the Pla	an, a Proof of Claim	must be time	ly filed.
II. CALCULATION OF PLAN PAY	MENT				
A) Secured claims (Section I-A Total):				\$	19,346.00
B) Priority claims (Section II-A&B To				\$	
C) Administrative claims (Section III-	A&B Total):			\$	
D) Regular unsecured claims (Section	IV-D Total)	:+		\$	0.00
E) Separately classified unsecured clair	ns:			\$	0.00
F) Total of $a + b + c + d + e$ above:			=	=\$	20,346.00
G) Divide (f) by .90 for total including	Trustee's fee	e:			
		Cost of Plan=	=	\$	22,606.80
(This represents the to	tal amount t	to be paid into	the Chapter 13 plan	)	
H. Divide (G), Cost of Plan, by Term of				60 months	
. Round up to nearest dollar for Month	ly Plan			\$	377.00
Payment: Enter this amount on page 1)					
arsuant to 11 U.S.C. § 1326(a) (1), unler an within thirty (30) days after the peti dequate protection payments directly to	tion is filed.	Pursuant to 1			
TIII. LIQUIDATION ANALYSIS					
. Real Estate:					
Address			Fair Market Value	Total Am	ount of Recorded Liens (Schedule D)
749 Berkley Street Berkley, MA 02779 Bristol County		\$	401,571.00	\$	74,202.00
20 Myricks Street Berkley, MA 02779 County	Bristol	\$	190,300.00 Debtor owns 50%	\$	0.00
Total Net Equity for Real Property:	\$	422,51	19.00		
	·				
Less Exemptions (Schedule C):	\$	125,00	00.00		

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B. Automobile (Describe year, make and	l model):			
2016 Chevrolet Silverado 8,000 miles	Value \$ <b>32</b>	, <b>150.00</b> Lien \$	<b>25,335.00</b> Exemption \$	6,815.00
Total Net Equity: Less Exemptions (Schedule C): Available Chapter 7:	\$ 6,815.00 \$ 6,815.00 \$ 0.00			
C. All other Assets (All remaining items Household Furnishings Misc. Electronics Clothing	on Schedule B): (Itemi	ze as necessary)		
Misc. Jewelry				
Cash Business Checking: Rockland Trust Personal Checking: Rockland Trust D/B/A Timothy Adams Whole Life Policy Through Metlife				
Total Net Value: Less Exemptions (Schedule C): Available Chapter 7:	\$ 21,640.00 \$ 19,740.00 \$ 1,900.00			
D. Summary of Liquidation Analysis (to	tal amount available und	er Chapter 7):		
Net Equity (A and B) plus Other Assets	(C) less all claimed exen	nptions: \$	299,419.00	
E. Additional Comments regarding Liqu	idation Analysis:			
IX. SIGNATURES				
Pursuant to the Chapter 13 rules, the debt all creditors and interested parties, and to			copy of the Plan upon the Chapter	13 Trustee,
/s/ Richard D. Smeloff		August 11, 201	17	
Richard D. Smeloff 567869ATY Debtor's Attorney Attorney's Address: 500 Granite Ave Suites 7&8		Date		
Milton, MA 02186 Tel. #: 6	17-690-2124 Fax:617-69	00-2506		
_	smeloff@msn.com			
I/WE DECLARE UNDER THE PENA ARE TRUE AND CORRECT TO THI				OF FACT
Date <b>August 11, 2017</b>	Signature	/s/ Timothy E. Adams Timothy E. Adams Debtor	ns	
		2 30101		

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# **United States Bankruptcy Court District of Massachusetts**

In re	Timothy E. Adams			17-12496
		Debtor(s)	Chapter	13

### **CERTIFICATE OF SERVICE**

I hereby certify that on <u>August 11, 2017</u>, a copy of <u>the Plan</u> was served electronically or by regular United States mail to all interested parties, the Trustee and all creditors listed below.

AmeriCredit/GM Financial	
Po Box 183853	
Arlington, TX 76096	
Harmon Law Offices	
150 California Street	
Newton, MA 02458	
Seterus Inc.	
PO Box 1077	
Hartford CT 06143	

/s/ Richard D. Smeloff

Richard D. Smeloff 567869ATY Smeloff & Associates 500 Granite Ave Suites 7&8 Milton, MA 02186 617-690-2124Fax:617-690-2506 rsmeloff@msn.com